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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Nun	nber ISC9901U	
		First Named Inventor	Ronald K. Yamamoto	
		COMPLE	TE IF KNOWN	
		Application Number	/	
.			Filing Date	December 11, 2000
Declaration Submitted	OR	Declaration Submitted after Initial	Group Art Unit	
with Initial Filing		Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Treatment of Ocular	Treatment of Ocular Disease							
the englithmation of which	(7	Title of the Invention)						
the specification of which is attached hereto								
OR		as United St	ates Application I	Number or PCT	International			
was filed on (MM/DD/YYYY)			••					
Application Number	and was a	mended on (MM/DD/YY)	YY)		applicable).			
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above iden	ntified specification	n, including the o	claims, as			
I acknowledge the duty to disclose in-part applications, material informational filing date of the	mation which became a	vailable between the filin	defined in 37 CF g date of the prio	R 1.56; including application and	g for continuation- the national or			
I hereby claim foreign priority ber certificate, or 365(a) of any PCT i America, listed below and have certificate, or any PCT internation	international applicatior also identified below.	n which designated at lea by checking the box, a	ast one country of ny foreign applic	ther than the Un ation for patent	ited States of or inventor's			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	y Attached? NO			
			0000	0000	0000			
☐ Additional foreign application	numbers are listed on a	supplemental priority da	ta sheet PTO/SB	/02B attached he	ereto:			
I hereby claim the benefit under	35 U.S.C. 119(e) of an	y United States provision	nal application(s)	isted below.				
Application Number(s) Filing 60/172,693 12/10		e (MM/DD/YYYY) 99	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					

[Page 1 of 2]
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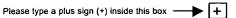
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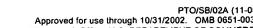
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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INV	ENTOR:			A petit	ion has been fi	ed for this unsigned inventor
Given Name Ronald K. Family Name Yamamoto or Surname					noto	
Inventor's Signature						Date
Residence: City San Francisco)		State CA	4	Country US	Citizenship US
Mailing Address 1321 Waller S	St.		•			
Mailing Address						
city San Francisco	State CA	\		ZIP	94117	Country US
NAME OF SECOND INVENTOR	:			A peti	tion has been fi	led for this unsigned inventor
Given Name Stanley (first and middle [if any])	R.			Family or Sun	Name Consto	on
Inventor's Signature						Date
Residence: City San Carlos			State C	4	Country US	Citizenship US
Mailing Address 148 Rogers A	ve.		,	-		
Mailing Address						
city San Carlos	State CA			ZIP	94070	Country US
Additional inventors are being named	·		ntal Additio		 .	O/SB/02A attached hereto.





PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of _1_

		_				
Name of Addit	tional Joint Inventor, if ar	ny:		A petition has been file	d for t	his unsigned inventor
Giv	en Name (first and middle [if any])		Family Nam	e or S	urname
Michael F.			N	ash		
Inventor's Signature						Date
Residence: City	Danville	State CA		Country US		Citizenship US
Mailing Address	4242 Quail Run Dr.					
Mailing Address						
city Danville	e	State CA		ZIP 94506	ountr	y US
Name of Addit	tional Joint Inventor, if ar	ıy:		A petition has been filed	for thi	s unsigned inventor
Give	en Name (first and middle [if any])		Family Nam	e or S	urname
Paul S.				Koch		
Inventor's Signature		···				Date
Residence: City	Warwick	State RI		Country US		Citizenship US
Mailing Address	566 Tollgate Rd.			-		
Mailing Address						
_{City} Warwic	k	State RI		_{ZIP} 02886	Cou	_{ntry} US
Name of Addi	tional Joint Inventor, if a	ny:		A petition has been filed f		
Give	en Name (first and middle [if any])		Family N	lame (or Surname
Inventor's Signature						Date
Residence: City		State		Country		Citizenship
Mailing Address						
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Application Number		•
Filing Date	December 11, 2000	
First Named Inventor	Ronald K. Yamamoto	
Group Art Unit		
Examiner Name		
Attorney Docket Number	ISC9901U	_

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	e of record of the entire inter nt under 37 CFR 3.73(b) is e)). 			
	SIGNATURE of	Applicant or Assigne	e of Rec	cord			
Name	Ronald K. Yamamoto						
Signature							
Date							
NOTE: Signatures of all forms if more than one	I the inventors or assignees of recosignature is required, see below*.	ord of the entire interest	or their rep	presentative(s)	are required. Submit	multiple	
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Examiner Name		
Attorney Docket Number	ISC9901U	_

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I am the: Applican	nt/Inventor.						
			est. See 37 CFR 3 enclosed. (Form P		(96).		
		SIGNATURE of A	Applicant or Assig	nee of l	Record		
Name	Stanley F	R. Conston					
Signature							
Date							
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Group Art Unit		
Examiner Name		
Attorney Docket Number	ISC9901U	

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🗶 Applican	nt/Inventor.		
	e of record of the entire interest. See 37 CFR ent under 37 CFR 3.73(b) is enclosed. (Form F		96).
	SIGNATURE of Applicant or Assig		
Name	Michael R. Nash		
Signature			
Date			
	If the inventors or assignees of record of the entire intere	st or their r	representative(s) are required. Submit multiple
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Examiner Name	
Attorney Docket Number	ISC9901U

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